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Bib Data Shoot

**CONFIRMATION NO. 3437** 

| SERIAL NUMBER<br>09/697,025                                                                        |                                                                                                     | FILING DATE<br>10/26/2000<br>RULE | C |  |                                                            | JP ART UNIT<br>2877 |  | ATTORNEY DOCKET<br>NO.<br>TNCR 183US0 |                 |
|----------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|-----------------------------------|---|--|------------------------------------------------------------|---------------------|--|---------------------------------------|-----------------|
| APPLICANTS                                                                                         |                                                                                                     |                                   |   |  |                                                            |                     |  |                                       |                 |
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| ** CONTINUING DATA **********************************                                              |                                                                                                     |                                   |   |  |                                                            |                     |  |                                       |                 |
| ** FOREIGN APPLICATIONS ************************************                                       |                                                                                                     |                                   |   |  |                                                            |                     |  |                                       |                 |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/03/2001                                          |                                                                                                     |                                   |   |  |                                                            |                     |  |                                       |                 |
| Foreign Priority claimed yes no STATE OR                                                           |                                                                                                     |                                   |   |  |                                                            | SHEETS              |  | TAL                                   | INDEPENDENT     |
| Verified and Acknowledged Examiner's Signature Initials CA                                         |                                                                                                     |                                   |   |  | DRA                                                        | AWING CL            |  | AIMS<br><i>A</i> 3 <b>9</b> 0         | CLAIMS<br>18 14 |
| ADDRESS 36257 PARSONS HSUE & DE RUNTZ LLP 655 MONTGOMERY STREET SUITE 1800 SAN FRANCISCO, CA 94111 |                                                                                                     |                                   |   |  |                                                            |                     |  |                                       |                 |
| TITLE Overlay error detection                                                                      |                                                                                                     |                                   |   |  |                                                            |                     |  |                                       |                 |
|                                                                                                    |                                                                                                     |                                   |   |  |                                                            | All Fees            |  |                                       |                 |
|                                                                                                    | FEES: Authority has been given in Paper<br>No to charge/credit DEPOSIT ACCOUNT<br>No for following: |                                   |   |  | 1.16 Fees ( Filing )                                       |                     |  |                                       |                 |
|                                                                                                    |                                                                                                     |                                   |   |  | 1.17 Fees ( Processing Ext. of time )  1.18 Fees ( Issue ) |                     |  |                                       |                 |
| RECEIVED<br>4094                                                                                   |                                                                                                     |                                   |   |  |                                                            |                     |  |                                       |                 |
|                                                                                                    |                                                                                                     |                                   |   |  | Other                                                      |                     |  |                                       |                 |
|                                                                                                    |                                                                                                     |                                   |   |  |                                                            | Orealt              |  |                                       |                 |